SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) RECEIVED



Permit #:	21-0171
Date:	(0-15-21
Amount Paid:	\$75 6-3-21
	\$60 6-15-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Planning and Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERIMI	REQUES	IED-	X		ANITARY 🗆 PRIV		CONDITIO	NAL USE	☐ SPECIA	L USE	B.O.A. [OTHE	R
Owner's Name: Patrick	+ 1	nne	- Chr.	sterser !	Mailing Address: 110 Lr. Stense	45	3d	City/State/	Zip: MN	557		Teleph	one: 3/8
Address of Property: VL Bark River Rd					City/Strate/7in:						. ,		73530
Contractor:			7 10	1/(4)					704				
5°C	14				contractor Filone.		Plumber:		1			Plumbe	er Phone:
Authorized Agent	: (Person Sig	ning Appli	cation on beha	If of Owner(s))	Agent Phone:	8	Agent Mai	ling Address	(include Cit	y/State/Zip)	:	Written Author Attach	ization
PROJECT					Tax ID#					Recorded	Document: (□ No
LOCATION	Legal	Descrip	tion: (Use T	ax Statement)		5	66				ZIR		8 3 3 7
<u>SW</u> 1/4,_	SE.	1/4	Gov't Lot	Lot(s) CS	M Vol & Page	CSM	Doc#	.ot(s) #	Block #	Subdivision	on:		
Section//	, Tow	nship <u></u>	50 N, R	lange W	Town of:	C	lover	-		Lot Size		Acre	eage 40
					Stream (incl. Intermitte		Distance Str	ucture is fr	om Shorelii	ne:	s your Proper	ty	Are Wetlands
☐ Shoreland -				of Floodplain?	If yescontinue —	▶				feet	in Floodplair Zone?	1	Present?
.	□ Is I	Property	/Land withi	n 1000 feet of Lake	Pond or Flowage If yescontinue —		Distance Str	ucture is fr	om Shorelii	ne : feet	☐ Yes		☐ Yes ► No
Non-Shorelan	d									ieet	S No		Ano
	16.14												
Value at Time of Completion						100	Total # of		w	hat Type	of		Type of
* include		Projec	t	Project	Project		bedrooms			Sanitary S			Water
donated time & material				# of Stories	Foundation		on property	100		the prope on the pr			on
& material	New	Constru	uction	1-Story	☐ Basement		□ 1	□ Mu	nicipal/Cit		орентун		property ☐ City
	/			☐ 1-Story +	•				w) Sanitar	<u> </u>	Type:		
\$5000	- Addi	LION/AII	teration	Loft	☐ Foundation	Foundation			· /= ·				□ Well
	☐ Conv			☐ 2-Story	□ Slab					/ <u>/</u> _			hone
			sting bldg)								or Uaulted (min 200 gallon)		
	☐ Run a		ess on		☐ Year Round		None		table (w/se npost Toile	service contract)			-
					X Seasona	d		⊠ Nor		et .			-
Fulation Character					7			1/					
Proposed Cons				siness is being applie	d for) Length: Length:	-5	4 ft	Width: Width:	16+	04	Height: Height:	1	D.f.+
		(0.000	T GITTETISIO		cengen		T	width.	147	-/	neight:	/ (7-7-
Proposed (Jse	✓			Proposed Stru	cture	•			Dim	ensions		Square Footage
					tructure on proper	ty)				(X)		
:			Residenc	e (i.e. cabin, hunt	ing shack, etc.)			4		(X)		
Residentia	l Use			with Loft with a Porch						(X)		
,				with a Porch with (2 nd) Porch						1	X)	-	
-1				with a Deck						(X)		
│ │	al Heo	with (2nd) Dock					i	x)					
Commerci	ai USE			with Attached	Garage		- A			(x)		
			Bunkhou	se w/ (□ sanitary,	or □ sleeping quart	ers, <u>o</u>	r 🗆 cooking 8	& food prep	facilities)	(х)		
			Mobile H	ome (manufacture	d date)					(х)		
☐ Municipal	Use		Addition	/Alteration (expla	in)					(х)		
		X		y Building (explain		Du	ildin	1		1241	x 161)	ت	384 ft
-		′□	Accessor	y Building Additio	on/Alteration (exp	lain)				(X)		1 /
			Special U	Special Use: (explain)							x)		ur and a summer

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Chy

Conditional Use: (explain)

Other: (explain)

Address to send permit

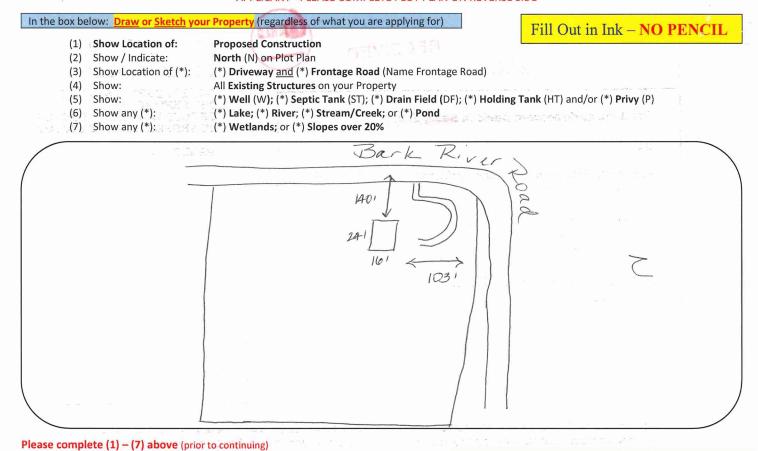
Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) Authorized Agent:

Date

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

55771 Copy of Tax Statement If you recently purchased the property send your Recorded Deed

χ



Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurem		Description	Setb Measure	
			-		
Setback from the Centerline of Platted Road	180+0	Feet	Setback from the Lake (ordinary high-water mark)	_	Feet
Setback from the Established Right-of-Way	147100	Feet	Setback from the River, Stream, Creek		Feet
			Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	90 103	Feet		,.	
Setback from the South Lot Line	1201	Feet	Setback from Wetland		Feet
Setback from the West Lot Line	80 150	Feet	20% Slope Area on the property	☐ Yes	□ No
Setback from the East Lot Line	80 H46	Feet	Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank		Feet	Setback to Well	-	Feet
Setback to Drain Field	_	Feet			
Setback to Privy (Portable, Composting)	_	Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

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You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:		
Permit Denied (Date):	Reason for Denial:					
Permit #: 21-017 [Permit Date:	5-21				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Recor	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Yes No			
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Yes No	/ Variance (B.O.A.)	#:		
Was Parcel Legally Created Was Proposed Building Site Delineated □ Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed Yes Yes				
Inspection Record: owner on sike, Code complian	it.			Zoning District (AGI) Lakes Classification ()		
Date of Inspection: 4-19(-21	Inspected by:	d Norwood	Street and the street	Date of Re-Inspection:		
Date of Inspection: L-111-21 Inspected by: Gdd Norman Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.) Structure not for human habitation / Sleeping purpises. No Pressurized water or plumbing allowed inside structure. Must meet and Maintain Setbacks.						
Signature of Inspector:	vood			Date of Approval:		
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:			

®® Augus† 2017 (®Oc† 2019)

Bayfield County, WI



WARRANTY DEED

This deed, made between David A. Sabo, Grantor,

and

Patrick Christensen and Anne Christensen, husband and wife, as joint tenants, Grantee,

Witnesseth, That the said Grantor, for a valuable consideration conveys to Grantee the following described real estate in Bayfield County, State of Wisconsin:

As Described in Attached Addendum/Exhibit A

Parcel No. 04-014-2-50-07-11-4 03-000-10000

This is not homestead property.

DANIEL J. HEFFNER BAYFIELD COUNTY, WI REGISTER OF DEEDS

2021R-588337

04/27/2021 10:11AM

TF EXEMPT #: RECORDING FEE: \$30.00 TRANSFER FEE: \$120.00

PAGES: 2

Return to:

Patrick Christensen and Anne Christensen 11450 Christensen Road Orr, MN 55771

File No. 117834

Together with all and singular the hereditaments and appurtenances thereunto belonging; And the said grantor warrants that the title is good, indefeasible in fee simple and free and clear of encumbrances except exceptions, reservations, easements and restrictions of record, and will warrant and defend the same.

Dated this 41 day of April, 2021.

State of Montana

Personally came before me this 21 day of April, 2021, the above named **David A. Sabo**, to me known to be the person(s) who executed the foregoing instrument and hereby acknowledge the same.

STUFFL TARA M STUFFLEBEAM **NOTARY PUBLIC for the** State of Montana Residing at Anaconda, Montana My Commission Expires fed by: November 15, 2024

Michael S. Brandia Midwest Title Group LLC

Notary Public, State of Montana

My Commission Expires: __//

1				
A				

Ownership

Real Estate Bayfield County Property Listing

Today's Date: 6/14/2021

Property Status: Current

Updated: 5/4/2021

Updated: 7/13/2017

Imp.

ORR MN

Created On: 3/15/2006 1:15:12 PM

Description

Updated: 5/4/2021

TECHNICAL COLLEGE

Updated: 3/15/2006

179-132;666-284;750-356

2021R-588337

Tax ID: PIN:

11566

04-014-2-50-07-11-4 03-000-10000

014104201000

Legacy PIN: Map ID:

Municipality:

(014) TOWN OF CLOVER S11 T50N R07W

STR: Description:

SW SE IN DOC 2021R-588337 315

Recorded Acres: Calculated Acres: Lottery Claims:

40.000 39.079 0

First Dollar:

No (AG-1) Agricultural-1

Zoning: ESN:

Tax Districts

Updated: 3/15/2006 1 **STATE** 04 COUNTY 014 TOWN OF CLOVER 044522 SCHL-SOUTHSHORE

001700

Recorded Documents WARRANTY DEED

Date Recorded: 4/27/2021

CONVERSION

Date Recorded:

Billing Address: PATRICK & ANNE

11450 CHRISTENSEN RD

PATRICK & ANNE CHRISTENSEN

ORR MN 55771

CHRISTENSEN

Mailing Address: PATRICK & ANNE CHRISTENSEN

11450 CHRISTENSEN RD

ORR MN 55771

Site Address

* indicates Private Road

Code

Property Assessment 2021 Assessment Detail

Acres Land **G6-PRODUCTIVE FOREST** 40.000 48,000

2-Year Comparison 2020 2021 Change Land: 48,000 48,000 0.0% Improved: 0 0 0.0% Total: 48,000 48,000 0.0%

Property History

Town, City, Village, State or Federal **Permits May Also Be Required**

LAND USF - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

21-0171 No.

Issued To:

Patrick & Anne Christensen

Location: SW 1/4 of SE Town of Cable Section 11 **Township 50** Range 7 W.

Gov't Lot

Lot

Block

Subdivision

CSM#

For: Residential Principal Structure: [1-Story; Pole Building (24' x 16') = 384 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure not for human habitation / sleeping purposes. No pressurized water or plumbing allowed inside structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

Todd Norwood

Authorized Issuing Official

June 15, 2021

Date

or if any prohibitory conditions are violated.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



	Permit #:	21-0178
ENTERE	Date:	6-22-21 150.00 Check
	Amount Paid: 5-3-21	150.00 Check
	Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made	payable to:	Bayfield (County Zoning	Department.	Bayfield Co.	Zoning,	Dept	HET I I	10000		/NO DE	
TYPE OF PERMI				/				UST be submitted	anna Marine en servicion	L OUT IN INK		
Owner's Name:	REQUE	14	1	11	Mailing Address:		CONDITIO	City/State/Zip:	IAL USE	□ B.O.A.	☐ OTHI	The second second second
Address of Brono	Dr	671	U	114	86885 L	enawe	20 /	Herbster	WIS	54844	715-	774-342
Address of Prope	885	Lev	1awee	Ró	City/State/Z		UI ST	4844			Cell Ph	one: 497-6447
C	Self		-		Contractor Phone		Plumber:	(1, 1, 0,	, <i>j</i>	*	Plumb	er Phone:
Authorized Agent		igning Appl	lication on beha	alf of Owner(s))	Agent Phone:		B ac I	ling Address (include	City/State	170):	7/5 Writte	373-207
							/ igene inter	mig Address (melade	city/State/	Ζιρ).	Author	
								1			Attach	ed □ No
PROJECT LOCATION	Lega	l Descrip	otion: (Use	Tax Statement)	Tax ID#	6904	this	will change		ded Document:		Ownership)
			Gov't Lot	Lot(s)	CSM Vol & Page		De l'Itol	W CSm Lot(s) # Block #	- 6	Vision:	58	1284
NW_1/4,_	NE	1/4		1	2180 112038	200	iR	block #	_	1	Bart	104 To
Section	3 , Tov	wnship _	50 N,	Range	w Town		Lover		Lot Siz		Acre	age
	\z.	_						1040		-		
1	Cree	Propert ek or Lan	y/Land with Idward side	in 300 feet of R of Floodplain?	iver, Stream (incl. Inter	(00)	Distance Str	ucture is from Shore	eline : feet	Is your Prope in Floodpla		Are Wetlands
Shoreland	□ Is	Property	y/Land with	in 1000 feet of	Lake, Pond or Flowag		Distance Stru	ucture is from Shore		Zone?		Present? X Yes
					If yescontinu				feet	☐ Yes ➤ No		□ No
☐ Non-Shorelan	d											
Value at Time							Total # of		What Ty			
of Completion * include		Projec	ct	Project			bedrooms			y System(s)		Type of Water
donated time		, ioje		# of Storie	es Foundatio	on	on	ls o	n the pro	perty <u>or</u>		on
& material	№ New	Constr	uction	→ 1-Story	☐ Basemer	nt	property 1	Will b		property?		property
			teration	☐ 1-Story +		1000		☐ (New) Sanit		cify Type:		☐ City
\$ 6000				Loft	- Foundati	1011	□ 2			20. WW		₩ Well
	☐ Conv	version		☐ 2-Story	X Slab		□ 3	☐ Sanitary (Ex	ists) Spe	cify Type:		
			isting bldg)					☐ Privy (Pit)	or 🗆 Va	ulted (min 20	0 gallon)	
	☐ Run Prop	a Busin	ess on		Use □ None □ Portable (w/serv					ontract)		
		erty			☐ Year Rou	ind		☐ Compost To	ilet			-
Existing Structu	ro lifade	dition alt	aunting of his	ato a self-tra	B 16 X							
Proposed Cons	truction:	(overa	all dimension	ns)	pplied for) Lengt		/	Width: 48) /	Height Height		./
								, ,		1		
Proposed I	Use	1			Proposed S	Structure			D	imensions		Square Footage
					rst structure on pro				(Х)	3
M			Residenc	with Loft	nunting shack, etc.)				(X)	
X Residentia	l Use			with a Por	ch				(X)	
				with (2 nd) I	Porch				(Х)	
				with a Dec					(Х) .	
☐ Commerci	al Use			with (2 nd) I with Attac	реск hed Garage				1	X)	
			Bunkhou		ary, <u>or</u> sleeping q	uarters, or	Cooking 8	of food prep facilities	1	Х	, \	
			Mobile H	ome (manufac	tured date)				(X)	
☐ Municipal	Use		Addition,	/Alteration (ex	xplain)				(Х)	
		X	Accessor	y Building (exp	olain)GAR				(4	5 x 48	1 2	160
					dition/Alteration ((Х)	
			Special U	se: (explain)					(Х)	
			Condition	nal Use: (explai	in)				(Х)	
					T - CTARTING CONCERN				(Х)	
I (we) declare that this	application (including a	ny accompanyini	g information) has be	T or STARTING CONSTRU	d to the best o	f my / aun lemand	-d d b - 10 - 6 to 1 - 1		mplete. I (we) ackn	owledge tha	t I (we) am
	nty relying or	this inform	nation I (we) am		ding and that it will be relied with this application. I (we)							
Owner(s):	iable time for	the purpos	se of inspection.	1/	Cenn.	\sim	- 0			5-	_	
(If there are Mul	tiple Owne	ers listed	on the Deed	MI Owners must	sign or letter(s) of aut	horization r	nust accompa	any this application)	Dat	e	a	/
		41	1).	760								
Authorized Ager	nt: 🛧	UNI	10/10						Dat	e		
Authorized Ager	nt: 🛧	ou are sign	ning on beha	If of the owner(s) a letter of authorizati	ion must ac	company this	application)	Dat			
Authorized Ager	(If yo	ou are sign	ning on beha	If of the owner(s) a letter of authorizati			111		Attach	Stateme	nt

In the box below: Draw or Sketch you	r Property (regardless of what you are applying for) Fill Out in Ink — NO PENCIL
(1) Show Location of:	Proposed Construction
(2) Show / Indicate:	North (N) on Plot Plan
(3) Show Location of (*):	(*) Driveway and (*) Frontage Road (Name Frontage Road)
(4) Show:	All Existing Structures on your Property
(5) Show:	(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(6) Show any (*):	(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(7) Show any (*):	(*) Wetlands; or (*) Slopes over 20%
Mawer Rd (40.5' (40.5') (40.5') (40.5') (40.5'	to continuing)
Please complete (1) – (7) above (prior	to continuing) Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setback Measurements
110	145.45				2 1 2
Setback from the Centerline of Platted Road	FIF FIF	Feet		Setback from the Lake (ordinary high-water mark)	>/000 Feet
Setback from the Established Right-of-Way	7. 1	Feet		Setback from the River, Stream, Creek	133 Feet
				Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	11.5	Feet			
Setback from the South Lot Line	140.5	Feet		Setback from Wetland	//O Feet
Setback from the West Lot Line	239	Feet		20% Slope Area on the property	,⊠Yes □ No
Setback from the East Lot Line	11.9	Feet		Elevation of Floodplain	Feet
			- 11		// >
Setback to Septic Tank or Holding Tank	NIA	Feet	NY.	Setback to Well	40 Feet
Setback to Drain Field	NA	Feet			
Setback to Privy (Portable, Composting)	N/A	Feet		I for this that the state of th	

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resources wetlands identification web page or contact a departn	nent of natural resources ser	Ace center (715) 685-2900.			
Issuance Information (County Use Only)	Sanitary Number:	Municipal	# of bedrooms:	Sanitary Date:	
Permit Denied (Date):	Reason for Denial:				
Permit #: 21-6178	Permit Date:	a-al			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recor	ious Lot(s))	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached	☐ Yes ☐ No ☐ Yes ☐ No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Ves No	/ Variance (B.O.A.) Case	#:	
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No	Were Property Lines Represented by Owner Was Property Surveyed Ves No				
Inspection Record: 5th 5th led and Appears code con	property recyclinate	cently survey	ed.	Zoning District Lakes Classification	(RRB)
	Inspected by:			Date of Re-Inspe	ction:
Condition(s): Town, Committee or Board Conditions Atta	ched? 🗆 Yes 🗆 No – (If	No they need to be atta	iched.)	,	1
Streeture not for human	habitation	/ steeping	purposes. 1	lo pressur.	zed water
Streeture not for human or plumbing allowed in	si de strictu	rc. must i	neet and		
Signature of Inspector:	mood			Date of Appro	oval: 6-2-21
Hold For Sanitary: Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees:	_ 0	

@@August 2017



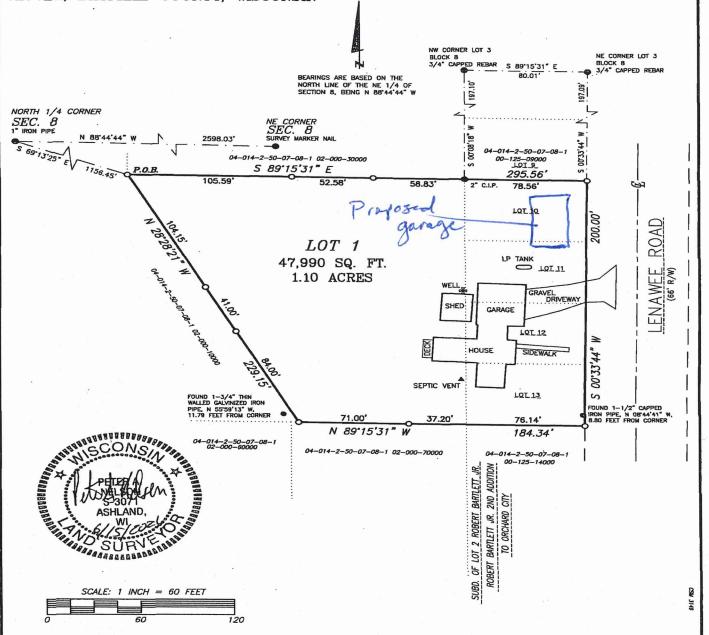
2021R-589286

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
06/15/2021 01:46PM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 2

BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 2180

LOTS 10, 11, 12 AND 13 OF THE SUBDIVISION OF LOT 2, ROBERT BARTLETT JR. 2ND ADDITION TO ORCHARD CITY, RECORDED IN VOLUME 2 OF PLATS ON PAGE 19, AS DOCUMENT NO. 64700a, AND OTHER LANDS LOCATED IN NW 1/4 OF THE NE 1/4 OF SECTION 8, T. 50 N., R. 7 W., IN THE TOWN OF CLOVER, BAYFIELD COUNTY, WISCONSIN

Vol.12CSMPg.388-389



LEGEND

- FOUND MONUMENT, AS NOTED
- 1" x 18" IRON PIPE, WEIGHING 1.13 LBS/FT, SET THIS SURVEY

() RECORDED INFORMATION

PIPE DIMENSIONS ARE OUTSIDE DIAMETER

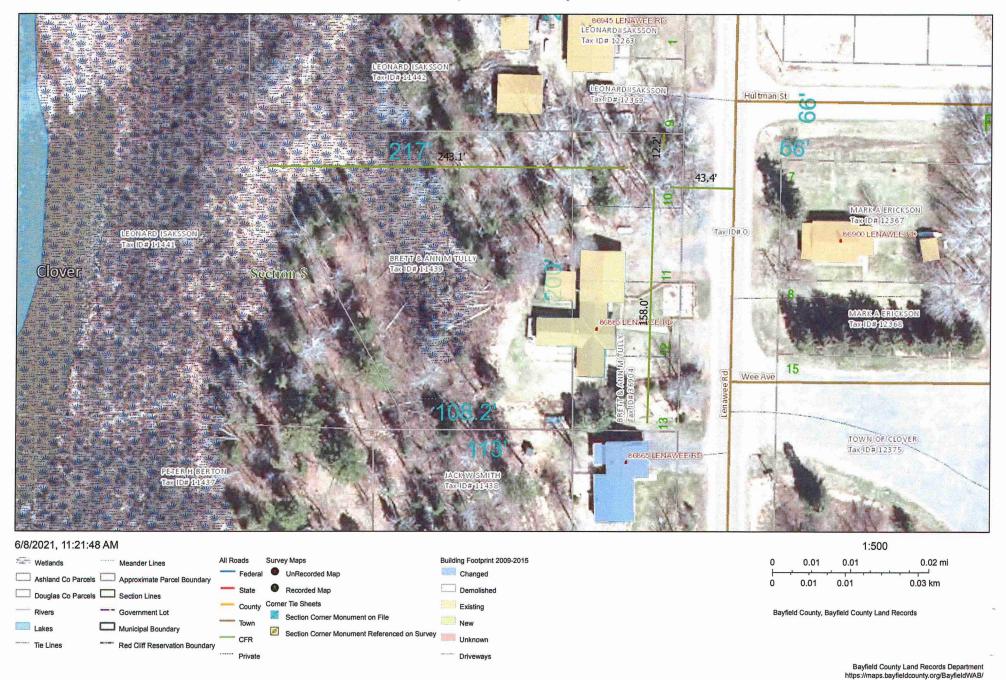
CLIENT: TULLY, B. JOB NO.: N21/023

SCALE: 1 INCH = 60 FEET MAY 10, 2021 FIELDWORK COMPLETED: 4/22/2021

DRAFTED BY: P. NELSON FILE:N/T50NR7W/SEC8/ ACAD&PSDATA/N21_023 TULLY NB. 425 PG. 59 NELSON SURVEYING INCORPORATED 101 W. MAIN STREET SUITE 100 ASSILAND, WISCONSIN 548 (715) 682-2692 FAIC: (715) 682-5100

SYING YOUR NECK OF THE WOODS SINCE 1964
MAP NO. CSM 3149 ©

Bayfield County, WI



Real Estate Bayfield County Property Listing

Today's Date: 6/17/2021

Property Status: Current

Created On: 7/29/2014 12:16:22 PM

Description

Tax ID:

36904

04-014-2-50-07-08-1 00-125-10100

Updated: 3/2/2021

Legacy PIN:

Map ID:

PIN:

Municipality: (014) TOWN OF CLOVER

STR: Description: S08 T50N R07W

ROBERT BARTLETT JR SUB LOTS 10 - 13 IN 2016R-565647 898; 899; 900; 901

Recorded Acres: 0.360

Calculated Acres: 0.330 0

Lottery Claims: First Dollar:

Yes ESN: 109

1

Tax Districts Updated: 7/29/2014 **STATE** 04 COUNTY 014 TOWN OF CLOVER 044522 SCHL-SOUTHSHORE 001700 TECHNICAL COLLEGE 047090 CLOVER SANITARY #1

Recorded Documents Updated: 7/29/2014

WARRANTY DEED

Date Recorded: 10/11/2016 2016R-565647

TRANSFER ON DEATH TO BENEFICIARY

Date Recorded: 10/11/2016 2016R-565646

TRANSFER ON DEATH TO BENEFICIARY

Date Recorded: 5/21/2014 2014R-554318 1125-212

QUIT CLAIM DEED

Date Recorded: 1/30/1991 390314 525-81

White=Current Parcels

HISTORY Expand All History Pink=Retired Parcels

Tax ID: 12373 Pin: 04-014-2-50-07-08-1 00-125-13000 Leg. Pin: 014112005000 Tax ID: 12372 Pin: 04-014-2-50-07-08-1 00-125-12000 Leg. Pin: 014112004000

Tax ID: 12371 Pin: 04-014-2-50-07-08-1 00-125-11000 Leg. Pin: 014112003000 Tax ID: 12370 Pin: 04-014-2-50-07-08-1 00-125-10000 Leg. Pin: 014112002000

36904 Children

Parents **This Parcel**

Ownership

Updated: 3/2/2021

HERBSTER WI

BRETT & ANN M TULLY

Mailing Address:

Billing Address: BRETT & ANN M TULLY BOX 144

HERBSTER WI 54844

BRETT & ANN M TULLY

BOX 144

HERBSTER WI 54844

Site Address * indicates Private Road

86885 LENAWEE RD HERBSTER 54844

Property Assessment Updated: 7/30/2018 2021 Assessment Detail Code Acres Land Imp. **G1-RESIDENTIAL** 0.360 5,400 89,500 2-Year Comparison 2020 2021 Change Land: 5.400 5,400 0.0% Improved: 89,500 89,500 0.0% Total: 94,900 94,900 0.0%

Property History

THE PROPERTY AND ADDRESS OF THE PARTY OF THE		
Parent Properties		Tax ID
04-014-2-50-07-08-1	<u>)0-125-10000</u>	<u>12370</u>
04-014-2-50-07-08-1	<u> </u>	12371
04-014-2-50-07-08-1	<u>)0-125-12000</u>	12372
04-014-2-50-07-08-1	0-125-13000	12373

Town, City, Village, State or Federal **Permits May Also Be Required**

LAND USF - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

21-0178 **Brett & Ann Tully** No. Issued To: Location: **Township 50** Town of **Clover** $\frac{1}{4}$ of -Section Range 7 W. 10-13 Subdivision Robert Bartlett Jr Gov't Lot Lot Block CSM#

For: Residential Accessory Structure: [1-Story; Garage (45' x 48') = 2,160 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure not for human habitation / sleeping purposes. No pressurized water or plumbing allowed inside structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

June 22, 2021

Date

Todd Norwood

Authorized Issuing Official

or if any prohibitory conditions are violated.

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0193
Date:	10-29-21
Amount Paid:	\$75 622-21
Refund:	

INSTRUCTIONS: No Checks are made p	ayable to:	Bayfield C	County Zoning	Department.	TO A	ayfield Co. Zonir PPLICANT. Origin		plication M	<u>UST</u> be sub	mitted	FILL	OUT IN INK (NO P	ENCIL)
TYPE OF PERMIT	REQUES	TED-	x	LAND USE	SAN	IITARY PRIVY		CONDITIO	NAL USE	□ SPECIA	LUSE	☐ B.O.A.	□ ОТ	HER
Owner's Name: JAMES & GAIL REHA				Mailing Address: City/State/Zip: 14 ER BSTE					Tolor	phone: -774-369				
Address of Proper	tv:	<u>_</u>	EHFT		/	City/State/7im		The state of the s				N 1	715	209 585
15830		ATE I	ilwy i	3		HERB	ST	ER V	VI	548	44			Phone:
Contractor:	5 %					ntractor Phone:		Plumber:					Plum N	ber Phone:
Authorized Agent:	: (Person Sig	gning Appli	cation on beha	lf of Owner(s))	Age	ent Phone:			ling Addres	s (include Cit	y/State/	Zip):	Write Auth Attac	orization ched
PROJECT LOCATION	Lega	l Descrip	tion: (Use 1	「ax Statement)		Tax ID# 1138	8			- }	Record	ded Document:		ng Ownership)
SE 1/4, W	58	1/4	Gov't Lot	Lot(s)	CSM	Vol & Page C	SM D	oc# L	.ot(s) #	Block #	Subdiv	rision:		
Section <u>6</u>	<u>4</u> , Tow	nship <u>T</u>	<u>N 50</u> n, f	Range <u>07</u> V	N .5	Town of:	UE	R			Lot Siz	e		creage 20.0
☐ Shoreland -	Cree			n 300 feet of Riv of Floodplain?		ream (incl. Intermittent	07.1	Distance Stru	ucture is fr	om Shorelii	ne : feet	Is your Prope in Floodplai		Are Wetlands Present?
- Shoreland	□ Is I	Property	/Land withi	n 1000 feet of La		ond or Flowage		Distance Stru	ucture is fi	om Shorelii	ne : feet	Zone?		■ Yes
Non-Shoreland	d						-				, rect	₽No		_ 110
Value at Time					allera s									
of Completion * include donated time & material	4)	Projec	t	Project Project bedrooms Sewer/9 on Is on				Sewer/S	What Type of 'Sanitary System(s) I the property <u>or</u> I on the property?			Type of Water on property		
	☐ New	Constr	uction	☐ 1-Story		☐ Basement		□ 1	□ Mu	nicipal/Cit	BONE BODY LINE WAS	description of the second		☐ City
(0,000	□ Addi	tion/Al	teration	☐ 1-Story + Loft						ry Specify Type:		₩ell		
,3000 -	☐ Conv	ersion		☐ 2-Story		□ Slab □ Sanitary (Exis					ists) Specify Type:			
	W 1 1 1		sting bldg)) gallor	n)	
	☐ Run a		ess on		Use						ontract)			
;			N HOU	SE	☐ Year Round ☐ Compost Toile					et				
Proposed Const					olied f		1.	-	Width:			Height:		
Troposed Colls	truction.	(overa	ili dimensior	is)		Length:	10	2.5	Width:	16	.5	Height:	-	12'
Proposed L	Jse	1				Proposed Struct	ture				D	imensions		Square Footage
						icture on property	y)				(X)		
			Residence (i.e. cabin, hunting shack, etc.)						(X)				
Residentia	l Use			with Loft with a Porcl	L					(X)	_		
				with (2 nd) P						(X)	-		
				with a Deck					_	-	(X)		
☐ Commonsi	with (2nd) Dack						(X)	-					
□ Commercia	Commercial Use with Attached Garage							(x)					
☐ Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilitie					facilities)	(X)	-						
☐ Mobile Home (manufactured date)									(X)				
☐ Municipal	Use		Addition	/Alteration (exp	olain)						(X)		
1	Control Control	×				GREEN H	100	SE			(1/2	5 × 16,5)	-	272.5
			Accessor	y Building Addi	tion	/Alteration (expla	in) _	and the second s			(x)		~ (4 ()
			Special U	se: (explain)							(х)		
			Condition	nal Use: (explain)						(х)		
			Other: (ex	(plain)							(Х)		
			FAILURE TO	OBTAIN A PERMIT	or STA	RTING CONSTRUCTION	J WITH	OLIT A PERMI	T WILL RESI	II T IN DENALT	IEC			

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be raised upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accomp ny this application) 06/9

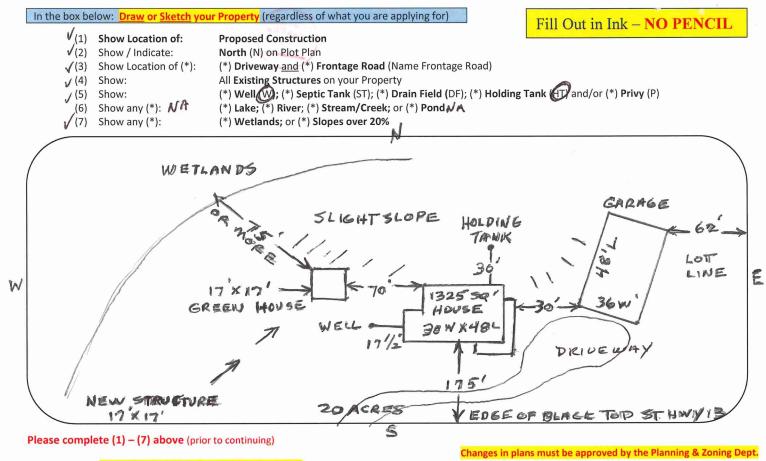
Date

<u>Attach</u> **Copy of Tax Statement**

Address to send permit ROBOX

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) 15 HELBSTER



(8) Setbacks: (measured to the closest point)

ALL SET BACKS FROM HOUSE

Description	Setback Measurements			Description	Setback Measurements		
ile	W413						
Setback from the Centerline of Platted	Road	188	Feet		Setback from the Lake (ordinary high-water mark)	NA	Feet
Setback from the Established Right-of-	Way 7		Feet		Setback from the River, Stream, Creek	NA	Feet
	8				Setback from the Bank or Bluff	NA	Feet
Setback from the North Lot Line	1105	1120	Feet				
Setback from the South Lot Line	210	142	Feet		Setback from Wetland	75	Feet
Setback from the West Lot Line	283	-500	Feet		20% Slope Area on the property	☐ Yes ☐	No
Setback from the East Lot Line	350	62	Feet		Elevation of Floodplain		Feet
					•		
Setback to Septic Tank or Holding Tanl	(90 30	Feet		Setback to Well	40 +7/2	Feet
Setback to Drain Field		NA	Feet				
Setback to Privy (Portable, Composting)		N/Pr	Feet				
Prior to the placement or construction of a structure w	ithin ten (10) feet o	of the minimum required	setback t	he bo	oundary line from which the setback must be measured must be visible from or	e previously surveyed co	rner to the

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 2	27828	# of bedrooms:	Sanitary Date: 9-12-94		
Permit Denied (Date):						
Permit #: 21-0193	Permit Date: 6-2	9-21				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes (Fused/Contigue) Yes Yes	uous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Yes No		
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:	11 11 11 11 11 11 11	Previously Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:				
Was Proposed Building Site Delineated Yes 🗆 No		Were Property Lines Represented by Owner Was Property Surveyed Wes				
Inspection Record: owner on-site and	e compliant	site identit	aird.	Zoning District (RKB) Lakes Classification ()		
Date of Inspection: 10-21-21	Inspected by:	id Norwor	L	Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Atta Structure not for human mantan setloners	ached? Yes No – (If	No they need to be atta	iched.) rposes. Must	meet and		
Signature of Inspector: Told Nav	word			Date of Approval: 6-24-21		
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees: 🗌			

Bayfield County, WI



Real Estate Bayfield County Property Listing

* Today's Date: 6/24/2021

Property Status: Current

Created On: 3/15/2006 1:15:12 PM

Description	on	Updated: 11/29/2006

Tax ID: PIN:

11388

Legacy PIN:

04-014-2-50-07-04-4 04-000-30000 014102707000

Map ID:

Municipality: (014) TOWN OF CLOVER

STR: Description: Recorded Acres: S04 T50N R07W

W 1/2 SE SE 211 20.000

Calculated Acres: 19.169 Lottery Claims: 1 First Dollar: Yes Zoning:

(R-RB) Residential-Recreational Business

ESN: 109

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
014	TOWN OF CLOVER
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE
Recorded Documents	Updated: 3/15/2006

■ CONVERSION

Date Recorded: 552-147;618-267;776E883 Ownership

Updated: 3/15/2006

JAMES J & GAIL M REHA

HERBSTER WI

Billing Address: JAMES J & GAIL M REHA

PO BOX 15

HERBSTER WI 54844

Mailing Address: JAMES J & GAIL M REHA

PO BOX 15

HERBSTER WI 54844

Site Address	* indicates Private Road	
15800 STATE HWY	13	HERB

15830 STATE HWY 13

BSTER 54844 HERBSTER 54844

Property Assessment	Updated: 7/13/2017			
2021 Assessment Detail			~~,~	
Code	Acres	Land	Imp.	
G1-RESIDENTIAL	1.000	10,000	152,000	
G5-UNDEVELOPED	9.000	2,700	0	
G6-PRODUCTIVE FOREST	10.000	12,000	0	
2-Year Comparison	2020	2021	Change	
Land:	24,700	24,700	0.0%	
Improved:	152,000	152,000	0.0%	
Total:	176,700	176,700	0.0%	



Property History

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

21-0193 James & Gail Reha Issued To: No. $W \frac{1}{2}$ of the Location: SE 1/4 of **SE** Township Town of **Clover** Section **50** Range 7 W. N. Gov't Lot Block Subdivision Lot CSM#

For: Residential Accessory Structure: [1- Story; Greenhouse (16.5' x 16.5') = 272.5 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure not for human habitation / sleeping purposes. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

June 29, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEZ TO: Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

Authorized Agent:

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

JUN 1 1 2021

Bayfield Co. Zoning Dept.

Permit #:	21-0194
Date:	4-29-21
Amount Paid:	\$540 6-24-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CO	NSTRUCTIO	N <u>UNTIL A</u>	LL PERMITS I	HAVE BEEN ISSUED T	O APPLICANT.	Original	Application	MUST be sub	mitted	FILL	OUT IN INK (NO PEI	NCIL)
TYPE OF PERMIT				LAND USE S	SANITARY	PRIVY	□ CONDIT	IONAL USE	☐ SPECIA	L USE	□ B.O.A.	OTHE	R
Owner's Name:	MICHA	SARA	VANAS	4 22E	Mailing Addre			City/State				Teleph	one:
Address of Proper			VALVA	SSE	240 RUTH		RD.	STILL	JATER, N	AN, S	5082	7156	889902
VACANT LAN	ANT LAND NEAR BARK PT RD HERBSTER, WI, 54844 Cell Phone:												
Contractor:	Contractor: 715 817 0246/ 715 372 5351 Contractor Phone: Plumber: Plumber Phone:												
Authorized Agent:				If of Owner(s)	Agent Phone:		(PEC-15)	Aailing Addres	PLUME				924156
N/A	(reison sign	ming Applic	.ation on bena	20.000	M/A		N/A		s (include City	y/State/ <i>i</i>	Ζ (p):	Attache	ization
PROJECT LOCATION	Legal	Descript	:ion: (Use T	ax Statement)	Tax ID#	3850	2				led Document:	(Showing	
1/4,	1	1/4	Gov't Lot	45 (VIII)	SM Vol & F	20 - 20	M Doc#	Lot(s) #	Block #	Subdiv	rision:		
Section 20	, Tow	nship	51 N, R	tange 07 W	To	own of:	CLOVER	, same		Lot Siz	е	Acre	age 3.34
♥ Choreland	Cree			n 300 feet of River of Floodplain?	r, Stream (incl. If yesconf		Distance S	Structure is f	rom Shorelir	ne : feet	Is your Prope in Floodplai		Are Wetlands Present?
Shoreland –	XIs F	Property	/Land withi	n 1000 feet of Lake	e, Pond or Flo		Distance S	Structure is f	1 10		Zone?		☐ Yes
☐ Non-Shoreland	d				ii yescom	inue —			180	feet	XNo		XNo
Value at Time											70 - 11 - 10 - 10 - 10 - 10 - 10 - 10 -		
of Completion				Project	Proje		Total #			hat Ty			Type of
* include donated time		Projec	t	# of Stories	Founda		bedroo	ms			y System(s) perty <u>or</u>		Water on
& material							proper	ty			property?		property
	X New	Constru	ıction	☐ 1-Story	☐ Baser	ment	□ 1	□ Mu	ınicipal/Cit	у			☐ City
ć	□ Addi	tion/Alt	eration	X 1-Story + Loft	□ Found	dation	□ 2	□ (Ne	ew) Sanitar	y Spec	cify Type:		⋉ Well
180,000	□ Conv	ersion		☐ 2-Story X Slab X 3 ☐ Sanitary (Exist				ts) Spe	cify Type:				
100,000			sting bldg)						🔀 Va	ulted (min 200	gallon)		
	☐ Run a		ess on	The state of the s						ontract)			
	Prope	erty				Round		□ Co	mpost Toil	et			-
	ш						HOLE .		iie				
				siness is being appli		ngth:		Width:	200		Height		
Proposed Cons	truction:	(overa	ll dimensior	ns)	Le	ngth:	12 44	Width:	24'		Height	2	3′
Proposed (Jse	1			Propos	ed Structu	ıre			94	imensions		Square Footage
		×		Structure (first			· INCLU	es 8'×1	4	13	2 × 24'	1,	008 109
		X	Residenc	e (i.e. cabin, hun	iting shack, e	tc.)	COVE	PED POP	CH-	(4	4 x 24		1056
Residentia	l Use			with Loft with a Porch	7 7 . 1	7.1	· CARIN	: 14 × 2	201	()	5 x 24		360
				with (2 nd) Por	rch	perch .	611917	K		(X 24		192
				with a Deck						(X		
☐ Commerci	al Heo			with (2 nd) De	ck					(Х		
Commerci	ai USE			with Attache	d Garage					(Х)	
			Bunkhou	se w/ (□ sanitary	, <u>or</u> 🗆 sleepii	ng quarters	, <u>or</u> 🗆 cookii	ng & food pre	p facilities)	(Х		
				lome (manufactur						(Х)	
☐ Municipal	Use		Addition	/Alteration (expl	ain)					(Х)	
				y Building (expla						(Х)	
	Accessory Building Addition/Alteration (explain) (X						Х)					
				se: (explain)						(Х)	
				nal Use: (explain)						(Х)	
			Other: (e	xplain)						(Х)	
L/well-states	f	lands d	FAILURE TO	OBTAIN A PERMIT o	r Starting con	STRUCTION	WITHOUT A PE	RMIT WILL RES	ULT IN PENAL	TIES			
(are) responsible for t	he detail and	accuracy of	all information	g information) has been I (we) am (are) providing	g and that it will be	relied upon by	Bayfield County	in determining wh	nether to issue a	permit. I	(we) further accept	liability whi	ich may be a
property at any reason	nable time for	the purpo	se of inspection	n (are) providing in or wi	1 1 1-			is charged with ad	ministering cour	nty ordinar	nces to have access	to the abov	e described
Owner(s):	The	4	Then		an/M	ana.	se			Dat	te 04/0	7/2	021
		are listed	on the Dood	All Owners must sig	an or letter(s) o	f authorizat	ion must acco	mnany this an	nlication				-

Address to send permit 240 RUTHERFORD RD., STILLWATER, MN 55082

Attach

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1)**Show Location of:**

Proposed Construction

Fill Out in Ink - NO PENCIL

(2) Show / Indicate: North (N) on Plot Plan

Show Location of (*): (3)

(*) Driveway and (*) Frontage Road (Name Frontage Road)

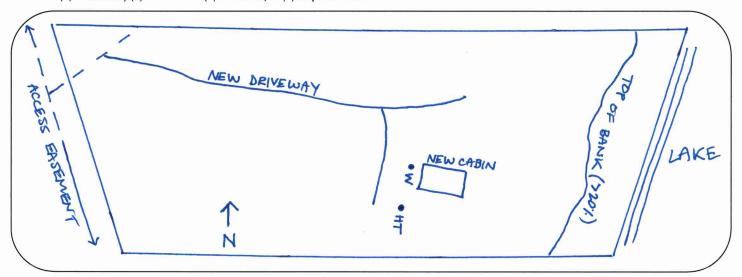
(4)Show: All Existing Structures on your Property

(5) Show: (6)

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20% (7)Show any (*):



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

nents
Feet
Feet
Feet
Feet
□ No
Feet
Feet

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 1	nitary Number: 21 - 68 s # of bedrooms: 4 Sanitary Date: (-17 -21					
Permit Denied (Date):	Reason for Denial:						
Permit #: 21-6194	Permit Date: 6-29-21						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes Yes	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Yes No			
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:					
Was Parcel Legally Created Was Proposed Building Site Delineated Yes □ No Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed Wes No					
Measured 137 to Bloth edge a South property line.	appears to	de complian lum. No 40	from surveyes	Zoning District (RRB) Lakes Classification ()			
Date of Inspection: 6-21-21	Inspected by:	dd Norwoo		Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.) Must obtain a uniform Dwelling Code (UDC) perm. 7 from the locally contracted UDC inspection agency prior to start of construction, must meet and marinary Setboncks							
Signature of Inspector:							
Hold For Sanitary:	Hold For Affid	lavit: 🗌 I	Hold For Fees: 🗌				

@@April 2021 (®Oct 2019)

Bayfield County, WI



BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 2174

A SUBDIVISION OF LOT 1 OF CSM #1826 RECORDED AS DOC. #2012R-546888 IN VOL. 10 OF CSM'S ON PG'S 375-376 IN THE BAYFIELD COUNTY REGISTRY ALL LOCATED IN GOVERNMENT LOTS 5,6, AND 7, SECTION 26, TOWNSHIP 51 NORTH, RANGE 7 WEST, TOWN OF CLOVER, BAYFIELD COUNTY, WISCONSIN.

Surveyor's Certificate

I, Patrick A. McKuen, Professional Land Surveyor S-2992, hereby certify that I have surveyed, divided and mapped; a subdivision of Lot 1 of CSM #1826 recorded as Doc. #2012R-546888 in Vol. 10 of CSM's on Pg's 375-376 in the Bayfield County Registry all located in Government Lots 5,6 & 7, Section 26, Township 51 North, Range 7 West, Town of Clover, Bayfield County, Wisconsin.

That the above described parcel of land contains 827,270 square feet more or less which is 18.99 acres more or less including that land lying between the meander line and the ordinary high water mark of Lake Superior.

That I have made this map at the direction of Sid Baccum, AGENT for said lands.

That said parcel is subject to any easements, restrictions and right-of-ways of record.

S-2992 ASHLAND

That I have fully complied with the provisions of Section 236.34 of Wisconsin Statutes and with the subdivision regulations of the Town of Clover and Bayfield County in surveying, dividing and mapping said parcel.

That this map correctly and accurately depicts the exterior boundaries of said parcel and the division thereof made.

dated this

Pine Ridge Land Surveying

Patrick A. McKuen WI PLS S-2992

BAYFIELD COUNTY ZONING APPROVAL CERTIFICATE

I, ROBERT SCHIERMAN, BAYFIELD COUNTY ZONING DIRECTOR.

* 2 0 2 1 2 - 5 8 8 5 0 2 2 *

AYFIELD COUNTY CERTIFIED SURVEY MAP NO. 2174

TOF CSM #1826 RECORDED AS DOC. #2012R-546888 IN VOL. 10 OF CSM'S ON PG'S 375-376 IN THE BAYFIELD COUNTY CATED IN GOVERNMENT LOTS 5.6, AND 7, SECTION 26, TOWNSHIP 51 NORTH, RANGE 7 WEST, TOWN OF CLOVER, BAYFIELD COUNTY, WISCONSIN.

LINE TABLE

STLINE / BEAR / /

FD. 32" IRON PIPE

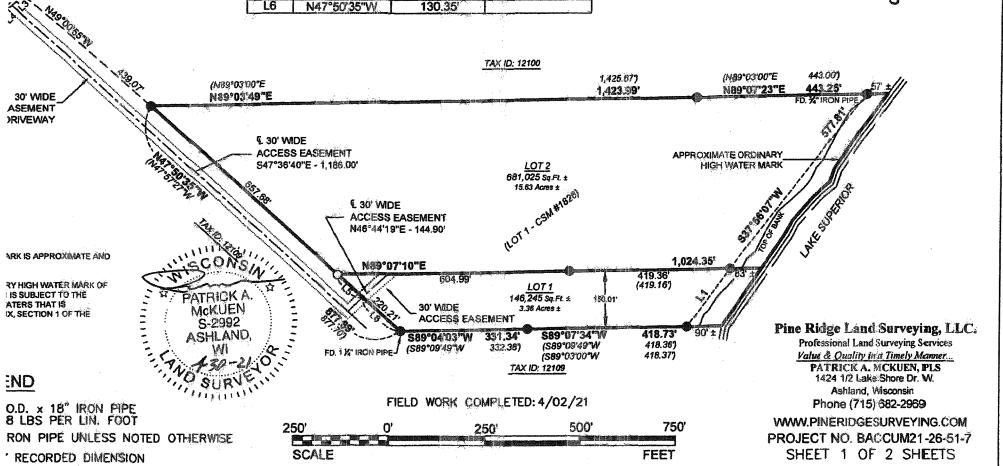
LINE	BEARING	DISTANCE	REC'D
	S36°11'08'W	188.021	(S36°11'35"W - 188.18)
L2	S47°34'32"W	100.621	(\$47°44'00'W - 100.70')
L3	S47°34'32"W	40.11	
L4	S47°34'32"W	60.51	
L5	N47°50'35"W	89.86	
L6	N47°50'35"W	130,35	

2021R-588502

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
05/04/2021 10:00AM
TF EXEMPT #:

RECORDING FEE: 30.00 PAGES: 2

Vol. 12 CSMR. 375-376



File Number.: 152161

Addendum Cropp to Vanasse Deed

į	Becky Ann Baccam
	STATE OF Maryland)
	STATE OF <u>Maryland</u>) SS. COUNTY OF <u>Harford</u>)
	Personally came before me this May 13 th 2021 the above named Becky Ann Baccam to me known to be the person(s) who executed the foregoing instrument and acknowledge the same.
	KOMBERLY NYGARD NOTARY PUBLIC HARFORD COUNTY, MARYLAND MY COMMISSION EXPIRES NOVEMBER 09, 2024 My commission expires: 14, 12, 12, 12, 12, 12, 12, 12, 12, 12, 12

File Number.: 152161

Addendum Cropp to Vanasse Deed

Barbara Jean Cropp

STATE OF LISCONSON COUNTY OF LOCK)55.

Personally came before me this 51419021 2021 the above named **Barbara Jean Cropp** to me known to be the person(s) who executed the foregoing instrument and acknowledge the same.

CARRIE R CAUTHORN NOTARY PUBLIC STATE OF WISCONSIN

#225914

MIDWEST Title Group

(800) 673-8710 • www.midwesttitlegroup.com

File Code:

ASH-Bay

File Number:

152161

ADDENDUM/EXHIBIT A

Lot One (1) of Certified Survey Map No. 2174 as recorded in Volume 12 of Surveys on Page 375, as Document No. 2021R-588502, being part of Lot One (1) of Certified Survey Map No. 1826 as recorded in Volume 10 of Surveys on Page 375, as Document No. 2012R-546888, located in and being part of Government Lots Five (5), Six (6) and Seven (7), Section Twenty-six (26), Township Fifty-one (51) North, Range Seven (7) West, Town of Clover, Bayfield County, Wisconsin.

TOGETHER WITH permanent and perpetual, non-exclusive driveway easement for ingress and egress as recorded October 30, 2013, as Document No. 2013R-552072.

For Informational Purposes Only, the above described lands are designated with the following:

Tax ID Number(s):

04-014-2-51-07-26-4 05-005-54000 (Parent)

Property Address(s):

Vacant Land near Bark Point Road

Herbster, WI 54844

N/A

*Real Estate Bayfield County Property Listing

Today's Date: 6/22/2021

CORRECTION DEED

Property Status: Next Year Created On: 5/20/2021 1:30:28 PM

Description	Updated: 5/25/2021
Tax ID:	38502
PIN:	04-014-2-51-07-26-4 05-007-56000
Legacy PIN: Map ID:	
Municipality:	(014) TOWN OF CLOVER
STR:	S26 T51N R07W
Description:	LOT 1 CSM #2174 IN V.12 P.375 (LOCATED IN GOVT LOT 7) IN DOC 2021R-588873 TOG WITH EASE
Recorded Acres:	3.360
Calculated Acres:	3.360
Lottery Claims:	0
First Dollar:	No
ESN:	109

Tax Districts	Updated: 5/20/2021
1	STATE
04	COUNTY
014	TOWN OF CLOVER
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE
_	

001700	TECHNICAL COLLEGE
Recorded Documents	Updated: 1/29/2015
WARRANTY DEED Date Recorded: 5/21/2021	2021R-588873
CERTIFIED SURVEY MAP Date Recorded: 5/4/2021	2021R-588502 12-375
QUIT CLAIM DEED Date Recorded: 10/30/2013	2013R-552071 1117-109

Date Recorded: 8/9/2013 2013R-550837 1112-344

Ownership Updated: 5/25/2021 **MICHAEL R & SARAH J VANASSE** STILLWATER MN

Billing Address: Mailing Address: **MICHAEL R & SARAH J** MICHAEL R & SARAH J **VANASSE** VANASSE 240 RUTHERFORD RD

Site Address * indicates Private Road

240 RUTHERFORD RD STILLWATER MN 55082 STILLWATER MN 55082

Property Assessment		Up	dated: N/A
2021 Assessment Detail			
Code	Acres	Land	Imp.
N/A			
2-Year Comparison	2020	2021	Change
Land:	. 0	0	0.0%
Improved:	0	0	0.0%
Total:	0	0	0.0%

Property History	
Parent Properties	Tax ID
04-014-2-51-07-26-4 05-005-54000	<u>37035</u>

HISTORY Expand All History White=Current Parcels Pink=Retired Parcels **Tax ID:** 12112 **Pin:** 04-014-2-51-07-26-4 05-007-10000 **Leg. Pin:** 014109502004 Tax ID: 12111 Pin: 04-014-2-51-07-26-4 05-007-20000 Leg. Pin: 014109502003 **Tax ID:** 12110 **Pin:** 04-014-2-51-07-26-4 05-007-40000 **Leg. Pin:** 014109502000 **Tax ID:** 12107 Pin: 04-014-2-51-07-26-4 05-007-30000 Leg. Pin: 014109410002 Tax ID: 12106 Pin: 04-014-2-51-07-26-4 05-005-50000 Leg. Pin: 014109410001 **Tax ID:** 12105 Pin: 04-014-2-51-07-26-4 05-006-50000 Leg. Pin: 014109410000 **Tax ID:** 36575 **Pin:** 04-014-2-51-07-26-4 05-005-51000 **Tax ID:** 36579 **Pin:** 04-014-2-51-07-26-4 05-007-32000 Tax ID: 12112 Pin: 04-014-2-51-07-26-4 05-007-10000 Leg. Pin: 014109502004 Tax ID: 12111 Pin: 04-014-2-51-07-26-4 05-007-20000 Leg. Pin: 014109502003 **Tax ID:** 12110 Pin: 04-014-2-51-07-26-4 05-007-40000 Leg. Pin: 014109502000 **Tax ID:** 12107 Pin: 04-014-2-51-07-26-4 05-007-30000 Leg. Pin: 014109410002 **Tax ID:** 12106 Pin: 04-014-2-51-07-26-4 05-005-50000 Leg. Pin: 014109410001 **Tax ID:** 12105 **Pin:** 04-014-2-51-07-26-4 05-006-50000 **Leg. Pin:** 014109410000 **Tax ID:** 36575 **Pin:** 04-014-2-51-07-26-4 05-005-51000 **Tax ID:** 36578 **Pin:** 04-014-2-51-07-26-4 05-007-31000 **Tax ID:** 12112 **Pin:** 04-014-2-51-07-26-4 05-007-10000 **Leg. Pin:** 014109502004 **Tax ID:** 12111 **Pin:** 04-014-2-51-07-26-4 05-007-20000 **Leg. Pin:** 014109502003 **Tax ID:** 12110 **Pin:** 04-014-2-51-07-26-4 05-007-40000 **Leg. Pin:** 014109502000 **Tax ID:** 12107 Pin: 04-014-2-51-07-26-4 05-007-30000 Leg. Pin: 014109410002 Tax ID: 12106 Pin: 04-014-2-51-07-26-4 05-005-50000 Leg. Pin: 014109410001 **Tax ID:** 12105 Pin: 04-014-2-51-07-26-4 05-006-50000 Leg. Pin: 014109410000 **Tax ID:** 36575 **Pin:** 04-014-2-51-07-26-4 05-005-51000 **Tax ID:** 36577 **Pin:** 04-014-2-51-07-26-4 05-005-53000 **Tax ID:** 12112 **Pin:** 04-014-2-51-07-26-4 05-007-10000 **Leg. Pin:** 014109502004 **Tax ID:** 12111 **Pin:** 04-014-2-51-07-26-4 05-007-20000 **Leg. Pin:** 014109502003 Tax ID: 12110 Pin: 04-014-2-51-07-26-4 05-007-40000 Leg. Pin: 014109502000 **Tax ID:** 12107 **Pin:** 04-014-2-51-07-26-4 05-007-30000 **Leg. Pin:** 014109410002

- Tax ID: 12106 Pin: 04-014-2-51-07-26-4 05-005-50000 Leg. Pin: 014109410001
- Tax ID: 12105 Pin: 04-014-2-51-07-26-4 05-006-50000 Leg. Pin: 014109410000 ■ Tax ID: 36575 Pin: 04-014-2-51-07-26-4 05-005-51000
 - **Tax ID:** 36576 **Pin:** 04-014-2-51-07-26-4 05-005-52000 **Tax ID:** 37035 **Pin:** 04-014-2-51-07-26-4 05-005-54000

38502

This Parcel

Parent

Children

$$\frac{1}{33} \left(\frac{1}{1 \text{ an } 14} - \frac{1}{1 \text{ an } 43} \right) \times .2$$

$$\frac{1}{.25} - \frac{1}{.93}$$

$$\frac{1}{4} - 1.08$$

$$33(3) = 99 \times .2 = 20'$$

$$33 \left(\frac{1}{\tan 26} - \frac{1}{\tan 43}\right) \times .8$$

$$\frac{1}{.5} - \frac{1}{.93}$$

$$2 - 1.08 = .92$$

$$33(.92) = 30 \times .8 = 24$$

· fec · (oft dimension

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY - 21-68S SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	21-	0194			Issued	To: Mic	Michael & Sarah Vanasse								
Location:	-	1/4	of	-	1/4	Section	26	Township	51	N.	Range	7	W.	Town of	Clover
Gov't Lot			l	₋ot	1	Bloo	ck	Sul	odivisio	n				CSM# 2	2174

For: Residential Use: [1.5 - Story; Residence (44' x 24') = 1,056 sq. ft.; Covered Porch (8' x 24') = 192 sq. ft.] (Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must obtain a UDC permit from the locally contracted UDC inspection agency prior to start of construction. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

June 29, 2021

Todd Norwood

Authorized Issuing Official

Date

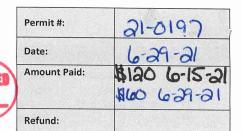
or if any prohibitory conditions are violated.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58

Washburn, WI 54891

(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN Date Stamp (Received) JUN 1 4 2021 Bayfield Co. Zoning De



Attach

Sygue Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

INSTRUCTIONS: No permits will be issued until all fees are paid.

				HAVE BEEN ISSUED TO	O APPLICANT. Origina	I Application	n <u>MUST</u> be sub	mitted	FILL OUT IN INK	(NO PE	NCIL)
TYPE OF PERMIT	REQUES"	TED-	2	LAND USE S	SANITARY PRIVY		TIONAL USE	☐ SPECIA	27	□ OTH	•
Owner's Name:	1.1.	_			Mailing Address:	100	City/State	THE RESERVE OF THE PERSON NAMED IN		Telen	hone:
Thomas Address of Proper	ACCUS.	5511			City/State/7in:					9:30	-801-76
	LENI	qué	E RD		City/State/Zip:	BSTE	R, WI	54	344	Cell P	hone:
Contractor:	Wis:	Cini	1	1	Contractor Phone:	Plumb	er:			Plumi	per Phone:
Authorized Agent:	(Person Sig	ning Applic	cation on beha	If of Owner(s))	Agent Phone:	Agent	Mailing Addres	s (include Cit	y/State/Zip):	Writte	en
	/)							, · · · · · · · · · · · · · · · · · · ·	Autho	orization
Mom	EW.	w	1								s 🗆 No
PROJECT LOCATION	<u>Legal</u>	Descript	tion: (Use T	ax Statement)	Tax ID# ///9	0			Recorded Document		g Ownership)
<u>NE 1/4, _</u>			Gov't Lot			M Doc#	Lot(s) #	Block #	Subdivision:		
Section 09	7 , Tow	nship _	49 N, R	ange <u>07</u> w	Town of:	OVER			Lot Size	Acı	reage 20
	□ le l	Property	/Land withi	n 200 foot of Bivor	, Stream (incl. Intermittent)		St	Cl. II	Is your Dron		00
	Cree			of Floodplain?	If yescontinue	Distance	Structure is f	rom Shorelii	feet in Floodpla		Are Wetlands Present?
☐ Shoreland —	□ Is F	Property	/Land withi	n 1000 feet of Lake	e, Pond or Flowage	Distance	Structure is f	rom Shorelii	Zone?		☐ Yes
~					If yescontinue ->				feet		No
XNon-Shoreland	d										
Value at Time						Total	# of	W	hat Type of		Type of
of Completion * include		Projec		Project	Project	bedroo	oms	Sewer/S	anitary System(s)		Water
donated time				# of Stories	Foundation	propo			the property or		on
& material	₩ New	Constru	uction	1-Story	☐ Basement	prope		inicipal/Cit	on the property?		property ☐ City
-1				☐ 1-Story +					y Specify Type:		,
\$60,000	□ Addii	Addition/Alteration Loft			☐ Foundation ☐ 2						Well
·	☐ Conv	ersion		☐ 2-Story	Slab □ 3		→ Sai	Sanitary (Exists) Specify Type:			1
	☐ Reloc	cate (exis	sting bldg)			☐ Vaulted (min 20	00 gallon	1			
	☐ Run a	Busine	ess on		Use	□ No			ervice contract)	o Ballott	<u></u>
	Prope	erty			Year Round Compost Toilet				et		
							□ No	ne			
Proposed Const				siness is being appli			Width:	40	Height		
Proposed Cons	truction:	(overa	II dimension	is)	Length:	(00	Width:	40			
Proposed l	Jse					Cer			Height	t:	26
		1			Proposed Structu				Dimensions	t:	Square Footage
					structure on property)	ıre				t:)	Square
TT.				e (i.e. cabin, hun	structure on property)	ıre			Dimensions (X (X))	Square
ℤ Residentia	l Use				structure on property)	ıre			Dimensions (X (X)))	Square
Ø Residentia	ıl Use			e (i.e. cabin, hun with Loft	structure on property) ting shack, etc.)	ıre			Dimensions (X (X))))	Square
双 Residentia	ıl Use			e (i.e. cabin, hun with Loft with a Porch with (2 nd) Por with a Deck	structure on property) ting shack, etc.) rch	ıre			Dimensions (X (X (X)))))	Square
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			Residenc	e (i.e. cabin, hun with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec	structure on property) ting shack, etc.) rch ck d Garage	ure			Dimensions (X (X (X (X (X (X (X (X (X))))))))	Square
			Residenc	e (i.e. cabin, hun with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec with Attaches se w/ (structure on property) ting shack, etc.) rch ck d Garage	ure			X X X X X X X X X X)	Square
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☐ Commerci	al Use		Bunkhou Mobile H Addition, Accessor	e (i.e. cabin, hun with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec with Attacher se w/ (sanitary, ome (manufactur /Alteration (explay y Building (explay	structure on property) ting shack, etc.) ch ck d Garage or sleeping quarters ed date) ain) CARAGE ion/Alteration (explain	or □ cook			X X X X X X X X X X)))))))))))))))))))	Square Footage
☐ Commerci	al Use		Bunkhou Mobile H Addition, Accessor Accessor	e (i.e. cabin, hun with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec with Attacher se w/ (sanitary, ome (manufactur /Alteration (explai y Building Additi se: (explain)	structure on property) ting shack, etc.) rch ck d Garage or sleeping quarters ed date) ain) n) CARAGE ion/Alteration (explain	ure , <u>or</u> □ cook			X X X X X X X X X X)))))))))))))))))))	Square Footage
☐ Commerci	al Use		Bunkhou Mobile H Addition, Accessor Special U Condition	e (i.e. cabin, hun with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec with Attached se w/ (sanitary, ome (manufacture / Alteration (explain) y Building Addition se: (explain)	structure on property) ting shack, etc.) ch ck d Garage or sleeping quarters ed date) ain) CARAGE ion/Alteration (explain	ure , <u>or</u> □ cook			Dimensions ()))))))))))))))))))	Square Footage
Commerci Municipal (we) declare that this (are) responsible for the result of Bayfield Couproperty at any reason Owner(s):	al Use Use sapplication (in the detail and in the relying on the land in the relying of the relying on the land in the relying of the relyi	including are accuracy of this inform the purpos	Bunkhou Mobile H Addition, Accessor Accessor Special U Conditior Other: (e) FAILURE TO ny accompanyin all information intign I (we), am ie of inspection.	e (i.e. cabin, hun with Loft with a Porch with (2 nd) Por with a Deck with (2 nd) Dec with Attacher se w/ (sanitary, ome (manufactur /Alteration (explai y Building Additi se: (explain) al Use: (explain) cplain) OBTAIN A PERMIT or g information) has been in (we) am (are) providing (are) providing in or wit	structure on property) ting shack, etc.) ch ck d Garage or sleeping quarters ed date) ain) n) CARAGE ion/Alteration (explain	without A Plest of my (our) Bayfield Count to county offici	ERMIT WILL RES knowledge and beli y in determining w ¹ als charged with ad	p facilities) JLT IN PENALT ef it is true, correther to issue a ministering cour	Dimensions ())))))))))))) nowledge t liability wis to the abo	Square Footage 2400 hat I (we) am nich may be a ove described

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

ENAWEE RD

Address to send permit _

In the b	ox be	low: Draw or Sketch you	r Property (regardless of what you are applying for) Fill Out in Ink – NO PENCIL
	(1) (2)	Show Location of: Show / Indicate:	Proposed Construction North (N) on Plot Plan
	(3)	Show Location of (*):	(*) Driveway and (*) Frontage Road (Name Frontage Road)
	(4)	Show:	All Existing Structures on your Property
	(5)	Show:	(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
	(6)	Show any (*):	(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
	(7)	Show any (*):	(*) Wetlands; or (*) Slopes over 20%
1			

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Setback Measurements		Description	Setback Measurements
	104		
D SOO Fee	et	Setback from the Lake (ordinary high-water mark)	Feet
	et	Setback from the River, Stream, Creek	Feet
	919	Setback from the Bank or Bluff	Feet
Lood Fee	et		
400 Fee	et	Setback from Wetland	Feet
/50 Fee	et	20% Slope Area on the property	☐ Yes ☐ No
500 Fee	et	Elevation of Floodplain	Feet
100 Fee	et	Setback to Well	2/ Feet
Fee	et		
Fee	et		
	Measurements	Measurements D COD Feet D SOO Feet LOOA Feet LOOA Feet LOOA Feet LOO Feet SOO Feet	Measurements Description Description

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

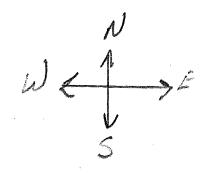
If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	167284	# of bedrooms:	Sanitary Date: 7-8-05		
Permit Denied (Date):	Reason for Denial:					
Permit #: 21 -0197	Permit Date: 6-2	7-21				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Recor □ Yes (Fused/Contigu	ous Lot(s))	Mitigation Required Mitigation Attached	THE RESERVE OF THE PROPERTY OF THE PARTY OF	Affidavit Required Affidavit Attached Yes No		
Granted by Variance (B.O.A.) ☐ Yes ☑ No Case #:		Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:				
Was Parcel Legally Created Was Proposed Building Site Delineated Wes Do		Were Property Lines Represented by Owner Was Property Surveyed Wes				
Inspection Record: owner on-site.		lace and s	Sakes	Zoning District (F) Lakes Classification (,)		
Date of Inspection: 6 - 29 - 21	Inspected by:	ed Norws		Date of Re-Inspection:		
Streture not for hu Water or plumbing all Selbacks.	ched? Yes No - (If	No they need to be atta				
Signature of Inspector: Tooled Norws			reservation .	Date of Approval: 6 - 29 . 31		
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:			

@@April 2021 (®Oct 2019)

80275 LengweeRf



GARAGE

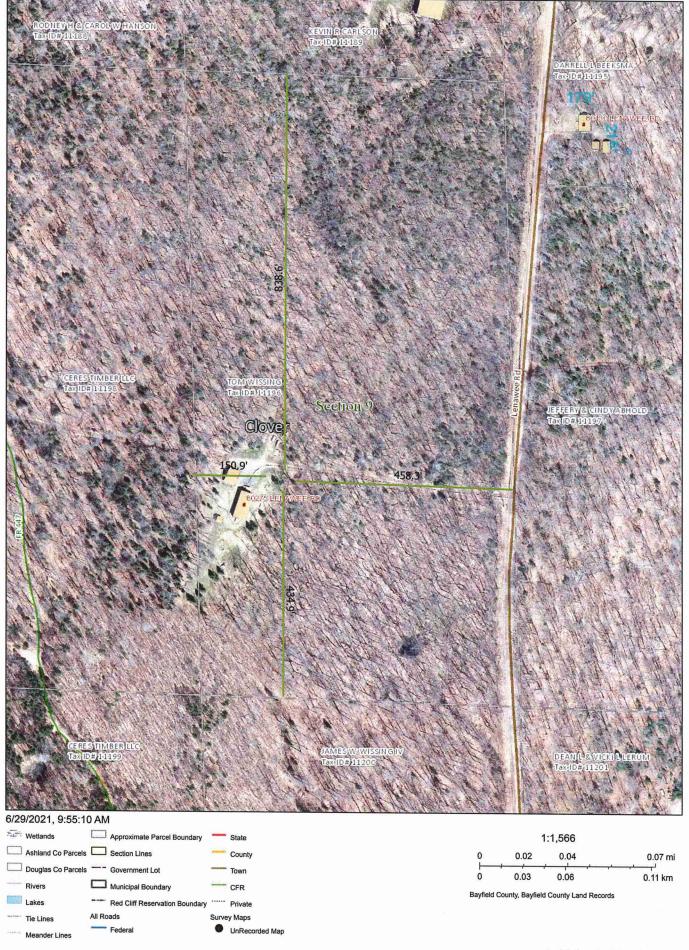
HOUSE

--> LENAWEE

DRIVEWRY PROPOSED o well

HOLDING TANK

Bayfield County, WI



Real Estate Bayfield County Property Listing

Today's Date: 6/29/2021

Property Status: Current

Created On: 3/15/2006 1:15:11 PM

Description Tax ID:

Updated: 9/29/2020 11196

PIN:

04-014-2-49-07-09-3 01-000-20000

Map ID:

Legacy PIN: 014100708000

Municipality: STR:

(014) TOWN OF CLOVER S09 T49N R07W

Description: Recorded Acres:

W 1/2 NE SW 55 20.000

Calculated Acres: Lottery Claims: First Dollar:

20.288 0 Yes

Zoning: (F-1) Forestry-1

109

ESN:

Tax Districts Updated: 3/15/2006 **STATE** 04 COUNTY 014 TOWN OF CLOVER 044522 SCHL-SOUTHSHORE 001700 TECHNICAL COLLEGE

Recorded Documents **■** CONVERSION

Date Recorded: 586-58;605-398;664-395 Ownership TOM WISSING

Updated: 9/29/2020

HERBSTER WI

Billing Address: Mailing Address: TOM WISSING **TOM WISSING** 80275 LENAWEE RD 80275 LENAWEE RD HERBSTER WI 54844 HERBSTER WI 54844

Site Address

* indicates Private Road

80275 LENAWEE RD HERBSTER 54844

Property Assessment	Updated: 7/6/2020				
2021 Assessment Detail			**************************************		
Code	Acres	Land	Imp.		
G1-RESIDENTIAL	1.000	10,000	89,300		
G6-PRODUCTIVE FOREST	19.000	22,800	, 0		
2-Year Comparison	2020	2021	Change		
Land:	32,800	32,800	0.0%		
Improved:	89,300	89,300	0.0%		
Total:	122,100	122,100	0.0%		



Updated: 3/15/2006

Property History

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Thomas Wissing 21-0197 Issued To: No. $W \frac{1}{2}$ of the Town of **Clover** Location: NE 1/4 of **SW** 1/4 **Township** 49 Range W. Section Subdivision CSM# Gov't Lot Lot Block

For: Residential Accessory Structure: [1-Story; Garage (60' x 40') = 2,400 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure not for human habitation / sleeping purposes. No pressurized water or plumbing allowed inside structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

Todd Norwood

Authorized Issuing Official

June 29, 2021

Date

or if any prohibitory conditions are violated.